

**A. FILING AN APPLICATION**

**Purpose:** This section includes rules and procedures on:

1. Who can apply for assistance;
2. How to apply for benefits; and
3. The minimum amount of information that must be provided to start the application process.

Effective July 1, 2002

**WAC 388-406-0005 Can I apply for cash, medical, or food assistance?**

- (1) You can apply for any program benefit the department offers, including cash, medical, or food assistance.
- (2) You must meet certain eligibility requirements in order to receive a program benefit.
- (3) You can apply for someone else if you are:
  - (a) A legal guardian, caretaker, or authorized representative applying on behalf of a dependent child, an incapacitated person, or someone who is deceased; or
  - (b) Acting on behalf of the applicant when the applicant can not apply for some other reason. We may ask why the applicant is unable to apply on their own behalf.
- (4) You do not need to apply for medical benefits if you get Supplemental Security Income (SSI) as we automatically open medical benefits for you.
- (5) A person or agency may apply for GAU or medical assistance on your behalf if:
  - (a) You are temporarily living out of state; and
  - (b) You are a Washington state resident.

**CLARIFYING INFORMATION**

1. **Applications by Others:** For cash, food, and medical assistance, third parties (i.e., persons not applying for themselves or their legal dependents) may apply for other persons. A third party must:
  - a. Be familiar enough with the client's circumstances to complete the application accurately; and
  - b. If we ask, tell us why they are applying on behalf of the applicant to help us identify if they should get Necessary Supplemental Accommodation (NSA) services under 388-472 WAC. Reasons why someone applies on behalf of another include when the applicant is:
    - (1) Physically or mentally ill or otherwise incapacitated;
    - (2) A minor child;
    - (3) Deceased;
    - (4) Subjected to domestic violence; or
    - (5) For GA-U and medical programs, temporarily residing outside the state.

2. **Authorized Representative:**

An authorized representative can be any adult non-assistance unit member with sufficient knowledge of the client's circumstances to act on the client's behalf. An authorized representative is designated by the client and can apply for benefits, have access to the client's benefits, and may use the client's benefits on the client's behalf. See **PAYEES – B. Authorized Representatives**.

Effective July 1, 2002

**WAC 388-406-0010 How do I apply for benefits?**

- (1) You can apply for cash, food, or medical assistance by giving us an application form in person, by mail, by fax, or by completing an online application.

- (2) If your entire household gets or is applying for Supplemental Security Income (SSI), then your household can file an application for food assistance at the local Social Security Administration District Office (SSADO).
- (3) A legal guardian, caretaker, or authorized representative can apply for a dependent child or incapacitated person or someone unable to apply on their own behalf for some other reason.
- (4) You can apply for cash, food, and medical assistance with just one application form.
- (5) If you apply for benefits at a local office, we accept your application on the same day you come in. If you apply at the wrong office, we send your application to the appropriate office no later than the next business day so that office receives your application on the same day we send it.
- (6) We accept your application for benefits if it has at least:
  - (a) For cash or medical assistance, the name, address, and signatures of the responsible adult household members or person applying on your behalf. A minor child may sign if there is no adult in the household. Signatures must be either handwritten, electronic or digital as defined by the department, or a mark if witnessed by another person; or
  - (b) For food assistance, the name, address, and signature of a responsible household member or person applying on your behalf.
- (7) As a part of the application process, you may be required to:
  - (a) Complete an interview if one is required under WAC 388-452-0005;
  - (b) Give us the information we need to decide if you are eligible as required under WAC 388-406-0030; and
  - (c) Give us proof of information as required under WAC 388-490-0005 so we can determine if you are eligible.
- (8) If you are eligible for necessary supplemental accommodation (NSA) services under chapter 388-472 WAC, we help you comply with the requirements of this section.

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**CLARIFYING INFORMATION**

**NOTE:** This section uses the generic term “**field office**” to apply to CSO, Social Security Administration and HCS offices.

1. **Opportunity to Apply:** Field offices must make application forms readily available and provide a form to anyone requesting one. Applying for a program benefit is separate and apart from any other program requirements. We cannot refuse an application form to a client because they are not meeting other program requirements or for any other reason. For example, we can not require or ask that a TANF applicant participate in a WorkFirst activity prior to our giving them an application form.
2. **Application Filing:** An application is filed when a field office receives a request for benefits. A request for benefits includes:
  - a. The ACES Request for Benefits (RFB);
  - b. The name, address, and signature on the DSHS 14-001(X) Application for Benefits form; or
  - c. Part 1 of the Online application.
3. **Name, Address, and Signature Requirements**
  - a. **Name & Address**

If an application is received without a name or address to contact the client, we make any reasonable effort we can to contact the client to find out who the client is and where they can be reached. If the client is in the office, we ask the client for an address where they can be reached.

- a. **Signatures**
  - (1) An application must be signed by the responsible adult household members as follows:

- (a) For cash and medical assistance:
  - (i) Both parents of minor children must sign the application if living together unless one is incapacitated and unable to sign the application; and
  - (ii) Both spouses must sign the application if living together unless one is incapacitated and unable to sign the application.
- (b) For food assistance, the signature of just one responsible adult household member.
- (c) For cash, medical, or food assistance, an application may be signed by a representative if the applicant is unable to apply on their own behalf or is unable to sign the application.
- (d) A minor child may sign the application if there is no adult in the home.
- (e) A mark is an acceptable signature if it is witnessed by another person.
- (f) Online applications for cash or food assistance are electronically signed when transmitted. The Personal Identification Number (PIN) used to complete the online application is an electronic signature.
- (g) Applications that are received without a signature must be signed either at the time of the interview or by mail.

**NOTE:** If an application is received without a name, address, or a signature to file, we accept the application and take whatever action we can to contact the client to get the information needed to officially file the application. We must take action on all applications received, even if there is information missing that is needed to file the application such as a name, address, or a signature.

<b>Application Chart</b>			
<b>Application Received</b>	<b>Application Signed?</b>	<b>Date of application</b>	<b>Action to Take</b>
Online—for cash or food assistance	Yes— <b>always</b> electronically signed when transmitted	Date received or next business day if received after business hours	Interview if required or desk review
Online—for medical assistance only or long-term care	No—electronic signatures not allowed at this time	Date received or next business day if received after business hours	Mail back for signature. Desk review only.
In-person, mailed, e-mailed, faxed, dropped off, or scanned	No	Date received or next business day if received after business hours	Have client sign at interview or mail back for signature

**4. Informational Handouts and Supplemental Forms:**

- a. The following informational handouts must be provided to all applicants:
  - (1) General Information about Fair Hearings, DSHS 22-028(X)
  - (2) Interpreter Services Notice, DSHS 16-146(X)
- b. For cash or family medical assistance, provide:
  - (1) Application for Benefits, DSHS 14-001(X), if needed.
  - (2) Child Support Enforcement Referral, DSHS 14-057(X) - one per absent parent;
  - (3) Public Assistance Assignment, DSHS 14-119(X) - one per absent parent; and
  - (4) How You Must Help Collect Support, DSHS 18-334(X) - one per

absent parent.

- (5) Veteran's referral, DSHS 14-162(X);
  - (6) Health Insurance Coverage Information, DSHS 14-194(X); and
  - (7) Rights and Responsibilities, DSHS 14-113(X).
- c. For pregnant women, family medical, and cash assistance for applicants with children:
- (1) EPSDT Information Brochure, DSHS 22-019(X);
  - (2) Women, Infants and Children (WIC) pamphlet to applicants who are pregnant, postpartum, or who have children under age five. Pamphlets are available to local WIC offices.
- d. For persons applying for General Assistance:
- (1) Statement of Employment and Health, DSHS 14-050(X), for applicants claiming incapacity;
  - (2) Veteran's Referral, DSHS 14-162(X), if any applicant in the household is a veteran of the armed services;
  - (3) Health Insurance Coverage information, DSHS 14-194(X), if an applicant indicates existing health insurance coverage in the Medical Information section of the DSHS 14-001(X)/14-078(X) or while completing the ACES TPL1 screen. See **THIRD PARTY LIABILITY** and **CHILD SUPPORT** for completion and distribution instructions.
- e. See **EMERGENCY ASSISTANCE** for forms needed when the client applies for Additional Requirements for Emergent Needs or the Consolidated Emergency Assistance Program (CEAP).
5. **Review Alerts:** Check the assistance unit (AU) alerts for possible computer matches made after screening. Compare match information with information provided by the client. Discuss and clarify any discrepancies during the interview.

6. **Interview:** See **INTERVIEW** and **DOCUMENTATION**.
7. **Changes Made to Correct an Application:**
  - a. If possible, have the applicant or applicant's representative make the changes by:
    - (1) Drawing a line through the incorrect entry;
    - (2) Writing in the correct entry; and
    - (3) Initialing and dating the change on the application.
  - b. If the applicant or applicant's representative is not available to make the changes, follow the above procedures and document on the ACES remarks screen.
8. See **Special Situations** for the following situations:
  - a. Applicant Temporarily Out of State
  - b. Medical Applications by Inmates of City or County Jails
  - c. Trial Visit Program
  - d. Persons Paroled and Released from State Correctional Institutions

## **WORKER RESPONSIBILITIES**

1. **Request for Benefits**
  - a. Send the client an application for benefits form the same day of the request if an applicant wants to apply for benefits by mail.
  - b. If a client requests help or appears to need help in completing an application form, then help them complete the form.
2. **Screening**



Screening gathers preliminary information to determine what programs a client may be eligible for. We also screen for certain services such as:

- a. Expedited Services;
- b. Emergency services (e.g. AREN);
- c. Social Services (e.g. child care); and
- d. Necessary Supplemental Accommodation (NSA) services.

### **3. Appointments**

If the client must be interviewed and is applying for multiple programs, schedule just one interview appointment. See **Interview Requirements**.

If an applicant is in the field office and cannot wait for an appointment because of an emergent need, schedule the earliest possible appointment and send the client the appointment notice. Make sure that sufficient mailing time exists from the day the appointment notice is mailed to the day of the appointment. An emergent need exists when the applicant:

- a. Is pregnant;
- b. Has no money or food;
- c. Is homeless or has received an eviction notice;
- d. Has no heat or has received a utility shutoff notice;
- e. Has no transportation;
- f. Is a domestic violence victim; or
- g. Is experiencing any other situation the field office considers an emergency.

**NOTE:** See **Expedited Service for Food Assistance** to determine if the applicant can get food assistance within five calendar days

**4. Applicant Lives Outside of the Field Office Catchment Area:**

- a. Determine if the application is in the correct field office. If the application received is in the wrong field office, date stamp the application and fax it to the correct field office no later than the next business day (see WAC 388-406-0010). The correct field office must get the application the same day we fax it.
- b. Tell or notify the client that the application was forwarded and give the applicant the name, location, and contact information of their field office.
- c. If the applicant lives outside of the field office catchment area but is unable to return to his or her home for a temporary period, accept the application for processing in the field office. Such temporary absences from the home include the applicant's temporary stay in a:
  - (1) Hospital or nursing home;
  - (2) Shelter for victims of domestic violence; or
  - (3) Emergency shelter or other living arrangement when the applicant is a victim of a natural disaster (e.g., flood).
- d. See **Completing the Application Process** for instructions on processing these applications after eligibility has been determined.

Effective July 1, 2002

**WAC 388-406-0012 What is the date of my application and how does it affect my benefits?**

The date of your application affects when your benefits start. The date of your application is the date any field office receives your application unless:

- (1) Your entire household gets or applies for Supplemental Security Income (SSI) and requests food assistance at the local Social Security office, then the date of application is the date Social Security gets your application; or
- (2) You apply outside of normal business hours, including online, dropped off, or by fax, then the date of your application is the next business day.

**WORKER RESPONSIBILITIES**

Date stamp the application on:

1. The same day we get the application, even if the application is sent to the wrong office; or
2. The next business day if the application is received outside of normal business hours.

**NOTE:** Applications received without a signature should not be date stamped again once the signature is received.